

CLAIMS ONLY							Application Number <i>10/650486</i>	Filing Date
							Applicant(s)	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend		
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Total Indep	3							
Total Depend	15							
Total Claims	18							